SEMI-ANNUAL PROGRAM REPORT
June 1, 2000 – November 30, 2000

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A publication of the
NGO Networks for Health Project

TABLE OF CONTENTS

INTRODUCTION

NGO Networks for Health *(Networks)* is an innovative five-year global partnership created to meet the burgeoning demand for quality services and information in family planning plus safe motherhood, child survival, and HIV/AIDS (FP/RH/CS/HIV). Through this G/PHN-funded initiative, five leading PVOs (ADRA, CARE, PATH, Plan International, and Save the Children) are working in partnership to build their capacity in the technical areas and to expand and/or create new information and service delivery networks that will lead to measurable gains in service provision and health status.

The potential to increase access, quality, and use of FP/RH/CS/HIV information and services cannot be underestimated as the Partners have infrastructure and long-term commitments in some 144 countries around the world, employ hundreds of health staff working in innumerable communities, and program annual budgets totaling $900 million. *Networks* will influence in critical ways how the Partners work, individually, together, and with others. In promoting an integrated approach to reproductive health, *Networks* also seeks to translate the International Cairo Programme of Action into field opportunities and to assess and document the effectiveness of program integration.

Importantly, too, this project is about sharing best practices, technologies, and thinking. It links the PVO/NGO community with the cooperating agency (CA) community, providing opportunities to work together and learn from one another.

I. APPROACHES TO RESULTS

A. Capacity-building Activities

Result One: Sustained PVO Capacity to Provide Quality FP/RH/CS/HIV services

Result Manager: Marge Koblinsky and Sumana Brahman

Networks capacity-building efforts focus on improving Partner capacity to provide quality FP/RH/CS/HIV information and services and on strengthening collaboration among the Partner organizations. This directly addresses our development hypothesis that collaborative effort is an effective means to achieve common health and development goals.

During this reporting period, *Networks* shifted the core of capacity-building efforts with Partners and their networks of NGOs (public and private providers) to be more field-driven through development of the *Networks* "family planning plus initiative" (FP+ initiative). This three-part Initiative will provide funding for projects in the field, a capacity-building effort and a learning process for supported field efforts in the following topical areas:

- Improving or expanding on-going family planning activities;
- Initiating the integration of family planning with child survival, safe motherhood, HIV/AIDS or non-health projects; and
- Improving/expanding or initiating adolescent sexual and reproductive health services.

The *Networks* FP+ initiative is designed to provide core funds to seed Partners' efforts to expand and integrate their family planning activities in the field. To better support this initiative, *Networks* will also collect, review, synthesize, and disseminate evidence-based practices related to family planning programming and its integration with other health and non-health initiatives. *Networks* will also promote a learning agenda to capture lessons learned from the field efforts to expand and integrate family planning programs through partnership and collaboration.

Key activities during this reporting period (June 1 – November 30, 2000)

- Supported recruitment of staff in Partners to promote organizational commitment to improved FP programming. ADRA, CARE, and PATH have hired additional staff to assist with this endeavor; specifically ADRA and CARE have hired Deborah Herold and Ellen Pierce respectively as technical advisors for reproductive health;
- Developed plan for accessing technical assistance from CAs (Appendix 1);
- Engaged technical assistance from PATH on adolescent sexual and reproductive health ;
- Engaged technical assistance from CARE via a cross-visit to see CARE's reproductive health programs in the field (Cambodia, August 2000);
- Supported regional workshops including travel for some participants to a PLAN-ADRA lessons learned workshop on reproductive health programs (Kenya, August 2000); a safe motherhood workshop in Asia (Thailand, November 2000); and planning for an HIV/AIDS workshop (Zambia, January 2001) and an adolescent reproductive and sexual health workshop (Philippines, February 2001);

- Safe Motherhood Conference in Chiang Mai, Thailand, was attended by representatives from Partners and other Asian NGOs. Participants came together to network, share, and present information on best practices and effective program interventions especially at the community level.
- Established the *Networks* FP+ Initiative to provide subgrants and technical support to Partners' field offices to expand and integrate family planning activities at the country level
- Held technical update seminar for Partners ("maximizing access and quality of FP/RH services")

Key activities planned for the next reporting period (December 1, 2000 – May 30, 2001)

- Develop criteria and guidance for a request for proposals for the *Networks* FP+ Initiative;
- Select projects and disburse grants under the *Networks* FP+ Initiative;
- Build knowledge base in *Networks* on evidence-based best practices in FP/RH programming strategies;
- Develop and implement capacity-building approach for country level programs, including continued technical assistance from CAs;
- Engage CAs for technical assistance to Partner country programs;
- Continue technical assistance from CARE and PATH to enhance FP/RH activities in Partners;
- Implement baselines for two core indicators to track capacity-building in Partners for FP programming;
- Initiate customized support to Partners on how each will measure capacity-building based on their individual action plans; and
- Support local or regional workshops on technical areas related to FP/RH programming (e.g. workshops on Lot Quality Assurance Sampling, HIV/AIDS, and Adolescent Reproductive Health).

B. Behavior Change Intervention

Result Two: Accurate Knowledge and Sustained Behavior Change at the Community Level

Result Manger: Premila Bartlett

Expanded knowledge and understanding of Behavior Change programming principles and strategies and the capacity to use them are essential to achieving the strategic objective of "*increased use of FP/RH/CS/HIV (FP+) practices and services through enhanced capacities of PVO/NGO Networks.*" The behavior change component in the *Networks* project is two-pronged—it entails building our Partners' capacity in designing and implementing effective health promotion programs at the global level and also in building the capacity of our Partners that form local networks in the focus countries (as well as in the FP+ countries in the future).

Key activities during this reporting period (June 1 – November 30, 2000)

- Defined the ASRH/BC joint capacity-building initiative and provided support to the Asian ASRH/Behavior Change initiative. The Asian component will include three main components through the FP+ Initiative – developing programs in 2-3 Asian countries jointly, dissemination of

best or promising practices in ASRH behavior change programming, and establishing and making operational a regional learning group.

- Made the opening presentation at the session on behavior change programming at the PLAN Lessons Learned conference in Kenya, August 12-18, 2000.
- Conducted a reproductive health behavior change capacity-building strategic planning workshop, October 4-5, for the Umoyo Network Partners in Malawi.
- Conducted sessions on how to apply qualitative research data to behavior change programs at the qualitative data analysis workshop in Armenia.
- Worked with the staff from the three Armenia pilot sites (Save the Children in Gavar, ADRA in Goris, and CARE in Gyumri) to outline a plan of action to build capacity in behavior change programming.

Key activities planned for the next reporting period (December 1, 2000 – May 30, 2001)

- Develop criteria for determining best practice in behavior change programming and in collaboration with the World Health Organization and the CHANGE Project, identify what type of product on best practices in behavior change will be useful to programming.
- Recruit and hire a behavior change specialist with expertise in qualitative methodologies and community mobilization.
- Establish Behavior Change/Adolescent Sexual and Reproductive Health (BC/ASRH) working/learning group(s) in Asia to develop position papers, review best and promising practices and provide recommendations for Partner BC/ASRH programs.
- Facilitate the development of a BC/ASRH program by at least one Partner in at least one Asian country.
- Provide technical support to the three pilot sites being implemented by ADRA, CARE, and Save the Children in Armenia to develop a health promotion and behavior change strategy for their respective programs.
- Develop and implement a comprehensive capacity-building program in community mobilization for the community mobilizers at the three pilot sites in Armenia.
- Provide the requisite technical support to Umoyo Networks in Malawi and NICASALUD in Nicaragua in providing capacity-building to their subgrantees in behavior change programming.
- Determine what is needed in terms of capacity building for Behavior Change programming to support projects selected in the FP+ Initiative.

C. NETWORK DEVELOPMENT

Result Three: Expanded Sustained PVO/NGO Networks to Provide FP/RH/CS/HIV Service Delivery

Result Manager: Colleen Conroy

This reporting period saw substantial progress in the area of network development that built upon the foundation of the last reporting period. Consultants Joanne Spicehandler and Darcy Ashman have ensured continuation of the work initiated by the Network Development Advisor (who departed November 11). Currently a new Network Development Advisor is being recruited.

Documentation of "successful" networks continued for the purpose of enhancing knowledge to inform network development and expansion under this project. Synthesis reports that had long been in progress on PROCOSI in Bolivia and on the women's networks in Nigeria are near completion. The latter report was funded by the Africa Bureau.

Building from this accrued knowledge of how networks develop, Gail Zucker and Darcy Asman presented their findings concerning the phased development of networks and measures to monitor successful networking at USAID in November.

Networks has provided ongoing organizational development (OD) support to focus country networks in Armenia, Malawi, and Nicaragua. Emphasis is on facilitation of development of a common vision, exploration of the pros and cons of working collaboratively, appreciation of what network members bring to the table, and agreements on new ways of working together to implement the vision and goals. Tools to gauge the progress of these networks in "networking" have been prepared by Darcy Ashman.

Networks functions as the Secretariat for the White Ribbon Alliance for Safe Motherhood, a network launched in May 1999, that now includes over 154 organizations as well as leaders/staff from donors, governments, and CAs. *Networks* supported White Ribbon Alliance activities at the 27th Annual Global Health Council Conference in June 2000. Alliance members presented highlights from the Global White Ribbon contest and on lessons learned from social mobilization campaigns.

Key activities planned for the next reporting period (December 1, 2000 – May 30, 2001)

- Develop a scope of work with PATH to document Kenya AIDS NGO Consortium (KANCO) and Youth Education Network (YEN).
- Plan and implement the dissemination workshops for PROCOSI and the Nigerian Networks.
- Prepare the final synthesis report for Groupe Pivot in Mali, and plan for their dissemination workshop.
- Baseline surveys of the networks in Nicaragua, Malawi and Armenia will be developed and plans made to implement them.
- Progress of the PVO partnership at global level will commence with Darcy Ashman's guidance.

II.   COUNTRY PROGRAMS

This reporting period reflects major activities in country programs, particularly with respect to network development and Partner capacity-building. Armenia held a Project Launch and Partners' Workshop in November which generated significant interest from potential partners in the regions and at central level. The three pilot sites in Armenia are under program implementation and will form the nucleus for the Regional Networks. Malawi continues to strengthen and expand the Umoyo Network. Focus during this period has been on strengthening Partners' capacity in such areas as Mother to Child Transmission (MTCT). NICASALUD, Nicaragua continues to strengthen the partnership between the 8 PVOs and 13 NGO Partners. Efforts are in progress to formally register NICASALUD as an NGO. Vietnam has focused on capacity-building of the Partners, particularly in training providers in essential obstetric care and in establishing a community-based component to complement the facility activities with demand generation. Additional funding to sustain the Vietnam activities was requested through the SO2 group of USAID.

A. Armenia

Overall goal	Reduce mortality and morbidity rates through the development of local capacity to provide sustainable quality reproductive health information and services
Status	Project office was established and staffed; three pilot sites that are testing three different service delivery models are established (ADRA working with *Tiknants Ojakh* in Goris in implementing a family health resource center; CARE working with the Berlin Center in Gyumri to implement an integrated one stop shop in reproductive health model; and Save the Children working with Family Care to implement a public/private partnership in Gavar); the central network was launched at a partner workshop, November 14-16, and potential partnerships with NGOs, MOH, and international organizations were explored.
Participating PVO Partners	ADRA, CARE, Save the Children
Lead PVO Partner	ADRA
Funding committed and period	$1.85 million in Field support – from August 2000 to March 2003
Country team leader	Premila Bartlett

The Network for Health (in Armenia) aims to contribute to USAID's overall goal of reducing mortality and morbidity resulting from preventable reproductive health conditions through increased access to high quality care and improved family planning/reproductive health knowledge, attitudes, and practices. To this end, the program will: 1) test three models for FP/RH information and service delivery at the community level through collaboration with local NGOs, the public sector, and the commercial sector; 2) advocate for quality RH services nationally; and 3) leverage funds for future activity. The three models will become the focus for three regional networks of local organizations that will be eligible for sub-grants once their institutional capacity has been adequately developed. In

addition, the Central Network, which will be administratively managed by the Network for Health Office in Yerevan, was launched on November 14, 2000. During the Stakeholder Workshop, November 15-16, 2000, potential Central Network partners were identified.

Key activities during this reporting period (June 1 – November 30, 2000)

- Obtained approval for Year One Work Plan from USAID Yerevan in August 2000.
- Central and Regional Network Development
  - Project Launch and Stakeholder Workshop conducted, November 14-16, 2000
  - Potential partners (22 central and 23 regional NGOs) identified
  - A core committee has been established at the Gyumri pilot site to oversee function of NGO Network development in the region.
  - Criteria and review process for proposals have been defined in a subagrants manual for Network Development.
- Programmatic Accomplishments
  - Qualitative baseline study was completed and analysis of the data was begun
  - Preparations to conduct a quantitative baseline survey at each of the three pilot sites were initiated
  - Key monitoring indicators were identified
  - Health Facility Surveys were completed in the three pilot sites and the training needs were identified. Plans to meet these training needs were also developed
  - Goris, Gyumri, and Gavar pilot sites became operational
    - ADRA, CARE, and Save recruited and hired Reproductive Health Advisors for the Goris, Gyumri, and Gavar pilot sites respectively. Other staff were also hired and the teams became operational.
    - MOUs were signed with each of the three regional governments.
    - Key partners in each of the three pilot sites were identified and their capacities were assessed.
    - Development of Health Information Centers in each of the three pilot sites began.
    - Development of facility and community based strategies were initiated.
    - Development of a capacity-building plan for each of the three pilot sites was initiated.

Key activities planned for the next reporting period (December 1-May 31, 2001)

- Network Development
  - Network for Health (in Armenia) will begin issuing subagreements to organizations that are to be a part of the Central Network.
  - A core management committee for the Central Network will be established.
  - Partner contracts with Gavar and Gyumri pilots will be signed and made operational.
  - Network for Health in Yerevan will put in place a team to manage the Central Network subagreements.
- Programmatic Priorities
  - Network for Health will begin working with the Ministry of Health to review and revise key protocols. These will include the ones that relate to anemia control and prevention during pregnancy; early and exclusive breast feeding; family planning services integrated with antenatal and postpartum services; and select protocols for management of obstetric complications.

- Network for Health will begin work with the three pilot site staff to improve the quality of family planning and reproductive health services particularly in the following areas:
  - Quality Family Planning and Reproductive Health Services—Maternal and Newborn
    - Quality antenatal care (including counseling services for family planning, iron folate supplementation, healthy life style, breast feeding and care of the newborn and clinical components)-facility-based with outreach services to ambulatories and medical points in the three pilots.
    - Quality maternity services in the Gavar pilot site.
    - Postpartum services- integration of family planning services and postpartum care of women in the three pilot sites.
    - Quality breastfeeding management.
    - Conduct training in clinical family planning, COPE, and counseling for key staff in the three pilot sites.
  - Comprehensive Behavior Change Strategies
    - Development and implementation of a comprehensive behavior change strategy for each site which is likely to include the following components:
      - Marketing of the reproductive health information and services offered by each pilot site health facility and information resource center.
      - Effective use of the media.
      - Advocacy with the appropriate stakeholders, especially policy makers and other influentials.
      - Community mobilization to link the community to the services that are being offered at each of the pilot sites.
  - Qualitative Baseline Study and Quantitative Baseline Survey
    - Complete the qualitative data analysis and conduct and analyze data from the quantitative study for baseline and program design.
    - Complete qualitative study and quantitative survey reports and disseminate data.

B. Malawi

Overall goal	Provide capacity-building to local NGOs in the design and management of HIV and RH programs and activities.
Status	Community-based HIV activities of 9 NGOs funded; Program Manager hired; NGO capacity-building plans developed; activities begun in network development; resource center created.
Participating PVO Partners	ADRA, CARE, Plan International, Save the Children
Lead PVO Partner	Save the Children
Funding committed and period	Approximately $4.9 million of field support – from June 1999 to September 2002
Country team leader	Mike Negerie

The Scope of Work for the Umoyo Network project includes establishing a NGO grants program, building the capacity of subgrantees, and developing a network of NGOs. Services are provided in grants management, capacity-building, health technical assistance, logistical support, and data

collection for the benefit of Malawian NGOs for monitoring and evaluation purposes. Resources are committed to technical assistance, grant activities, and strengthening the capacity of NGO partners to design and deliver quality FP/RH/CS/HIV services particularly focusing on HIV/AIDS. Programmatic emphasis is placed on activities targeted at adolescent and community groups for the delivery of Voluntary Counseling and Testing (VCT), and Home-Based Care (HBC) services.

During this reporting period, several workshops, TA, and training sessions were held to strengthen the capacity of subgrantees to deliver effective FP/RH/HIV services and information. CAs such as LINKAGES, and CDC provided TA in FP/HIV service delivery, including TOT on prevention of MTCT of HIV.

Bridge grants were provided to two national AIDS Networks. Planning for a Networks development meeting was pushed back to the second quarter of 2001. During this meeting, a strategy will be developed in which the Network's structure, programmatic focus, governance, and capacity development issues are detailed. Serious consideration will be given to developing a Network using the existing national AIDS networks Umoyo is currently working with rather than creating a new network.

The interactive Umoyo Café became a more actively used resource center, with visitors taking advantage of additional equipment and resource materials procured recently. Internet services are readily accessible. The center is also used as a meeting place.

Key activities during this reporting period (June 1 – November 30, 2000)

- Work Plan and Proposal Development
    - Held workshop with Umoyo staff, the donor, MOH reps, sub-grantees, the donor, PVO Partners, and NGO Networks staff to plan annual activities
    - Developed and submitted Year II Workplan to USAID
    - Developed and submitted LIFE Initiative proposal for funding from USAID
    - Completed integrated work plan (incorporating LIFE Initiative activities)
    - PVO Partner collaborative proposals (ADRA/SC, CARE/SC, and PLAN/MACRO/Eqwendeni Hospital) developed
- Grants Management
    - Awarded two second cycle grants to local NGOs (MACRO, BCC)
    - Awarded two capacity-building bridge grants to AIDS networks (MANASO, NAPHAM)
    - Awarded new grant to DAPP
    - Developed and systematized a mini-grant tracking system
- Network Development
    - Coordinated/developed strategic capacity-building plan for two National AIDS Networks (NAPHAM and MANASO).
        - Facilitated strategic organizational development plan for selected NGOs (MACRO and Lighthouse).
        - Held quarterly network development meeting with sub-grantees
- Capacity-building

- Supported NACP in: formulation of national policy on HIV/AIDS; facilitation of workshops and reporting; and mainstreaming HIV/AIDS issues in the public sector through training of sector representatives, plus:
  - Sponsored four Malawians (NGO community, MOH, and Umoyo) to attend LINKAGES MTCT TOT training in Ndola, Zambia.
  - Sponsored five attendants to the international AIDS conference in Durban, South Africa.
  - Held BC forum for Partners, Umoyo, MOH and subgrantees to foster common vision and approach to behavior change.
  - Hired a senior Program Manager (for Umoyo) with a combination of health and management skills
  - Networked with Peace Corps Organization to access volunteers to support capacity-building efforts of sub-grantees (i.e., MANASO)
  - Organized a TOT workshop on MTCT of HIV in collaboration with LINKAGES
  - Printed and disseminated MOH family planning materials
- Participation in Key National Events
  - Co sponsored and supported "World AIDS Day" in collaboration with MOH/NACP
  - Co-sponsored and supported "Blood Drive Day" in collaboration with the University of Malawi
  - Provided venue for meetings of journalists known as "Networks for All Africa Journalists" to improve awareness and advance AIDS agenda in Malawi
  - Coordinated meetings for NGOs and other stakeholders briefing on cross-boarder operations on HIV/AIDS in collaboration with NACP, FHI, and USAID.
    - Coordinated two Expanded STAFH meeting for technical update on quality assurance, MTCT, LAM and breastfeeding in collaboration with USAID, MOH and others.
    - Participated in the National MTCT Task Force to introduce and operationalize MTCT activities in Malawi.
    - Supported and participated in the review and adaptation of national HBC manual
- Resource Center (Umoyo café)
  - Procured additional equipment for resource center (i.e., 4 computers and printers)
  - Expanded literature resources and systematized procedure for circulation of materials

Key activities planned for the next reporting period (June 1 - November 30, 2000)

- Support Umoyo in hiring additional key staff needed to strengthen technical capacity
- Assist in development of additional Partner activity proposals
- Fund and launch Partner activities
- Collaborate with Umoyo to plan and implement network development workshop
- Provide technical support for PLA training for subgrantees.
- Award up to four grants to current NGO sub-grantees for year two

C. Nicaragua

Overall goal	Facilitate the restoration of health services while building sustainable provider networks to expand service coverage in Hurricane Mitch-affected communities

Status	NICASALUD coordinating unit was established and additional staff hired; 21 PVO and NGO members; baseline survey completed; technical capacity-building activities underway; pursuing legal incorporation as a local organization; budget management technical support to NGOs are ongoing.
Participating PVO Partners	ADRA, CARE, Plan International, Save the Children, Catholic Relief Services, Project Concern International, Partners for America, Project Hope, and 13 local NGOs
Lead PVO Partner	CARE
Funding committed and period	• $6.1 million in field support and $800,000 in core funding – from July 1999 to December 2001 • $300,000 additional field support for the period from August 2000 to December 2002
Country team leader	Theresa Shaver

With CARE as the lead PVO, the *Networks* project in Nicaragua seeks to rapidly disburse subgrants to PVOs and NGOs to help improve the health status of communities affected by Hurricane Mitch. This is achieved by working through *NICASALUD,* a newly formed NGO network, based in Managua. NICASALUD offers an opportunity to build on the existing infrastructure of PVO/NGO health and relief programs to deliver larger scale and higher quality RH/CS/HIV services and information to communities. Specific strategies include:

- *Managing subgrants program for PVO and NGO activities in Mitch-affected areas*: Subgrants management includes soliciting, reviewing, and selecting proposals, disbursing and monitoring grant funds, reporting, and evaluation. Subgrants are financing child health, infectious disease, and reproductive health activities (family planning excluded), as well as related operational costs; and rehabilitation, reconstruction, and re-equipment of health services.
- *Enhancing collaboration among grants recipients and other health service providers in Mitch-affected areas to improve service delivery*: This includes sharing information, reducing duplication of services, building collaborative activities including public/private partnerships, and promoting provision of complementary services to communities.
- *Promoting sustainable healthy behaviors in Mitch-affected communities*: This includes reviewing appropriate behavior change strategies and interventions, including behavior change as a key component of the subgrants, community mobilization, and community assessments.

During this reporting period, CARE, as the lead PVO Partner continues to lead the growth of the project and to expand NICASALUD's reach. Presently the subgrants program includes 8 PVOs and 13 local NGOs. The capacity-building workshop in February 2000 was further supported in October 2000 with a capacity-building implementation plan workshop with the focus on behavior change and IMCI. Other technical assistance for the PVO capacity-building plan includes PRIME (exploratory

visit to investigate potential activities to improve PVO/NGO's Safe Motherhood/FP activities) and in February 2001, Linkages (to conduct a LAM TOT course).

Key activities during this reporting period (June 1 – November 30, 2000)

- Supported NICASALUD in hiring additional staff who are technically qualified in capacity-building and subgrants management.
- Provided technical assistance for PVO capacity-building.
- Supported the development of a capacity-building plan for PVOs/NGOs.
- Participatory baseline assessments for the local NGOs completed.
- Provided technical assistance in budget management for NGOs.
- Hired a regional technical advisor based in Nicaragua.
- Conducted a training workshop in EPI Info for PVOs and NGOs.
- Outlined with Partners a common vision for BC programs and plan for their implementation.
- Provided technical assistance for a PVO/NGO directors' retreat on governance, fundraising and advocacy.
- Supported the project start-up workshop for local NGOs.
- Provided technical assistance to support the development of a PR plan, identifying potential donors, and developed a strategic plan for fund-raising in order to establish a diversification of the donor base.
- Organizational Review conducted November 2000.
- Exploratory visit was conducted by Prime November 2000 to develop plans for a monitoring system and for training in obstetric care.
- Training workshop in clinic-based IMCI, for MOH, PVOs and NGOs was completed in November, 2000.

Key activities planned for the next reporting period (December 1 – May 31, 2001)

- Continue to support the PVOs/NGOs capacity-building proposals.
- Continue to provide technical support in the development and implementing behavior change programs.
- Continue to provide NICASALUD with ongoing coaching and TA to respond to capacity-building needs of member agencies.
- Develop tools to assess the effectiveness of the network and its membership.
- Conduct process, analysis and develop a plan for communication, documentation, and dissemination.
- Support the annual program review and planning process.
- Conduct periodic management visits.
- Prepare a strategic plan to guide NICASALUD's long term goals and future.
- Pursue legal incorporation of NICASALUD as a local and independent non-governmental organization.
- Develop comprehensive monitoring and evaluation systems for continual improvement of project results.
- Increase on-site monitoring and coaching of NGOs.
- Continue to coordinate closely with the Ministry of Health and other important groups in the health field.

- Strengthen and build the network through a clearer definition of membership, reflecting a shared vision among the international and national partners of what the network should be.
- Develop funding proposals to diversify funding sources and obtain donor commitments beyond the current grant period.
- Raise NICASALUD's visibility in the community of donors and health development organizations.

D. Other Countries

In addition to the activities in the three focus countries described above, *Networks* has been involved in Vietnam and explored Ethiopia to engage in activities with existing networks.

Vietnam

The aim of this Network is to increase the use of RH/CS/HIV practices and services through enhanced capacities of the Vietnam Networks. CARE is the lead PVO, but given the funding constraints, the Vietnam Networks has a more programmatic approach – giving emphasis to targeted technical support for the Safe Motherhood/Newborn Care project now under implementation, while supporting Partner networking in country.

Key activities during this reporting period (June 1 – November 30, 2000)

- CARE International had provided leadership in setting up the physical and administrative aspects of an office set-up, local recruitment and other administrative and financial procedures.
- Regular management meetings have been conducted.
- Technical Advisory Group meetings have been established.
- Technical assistance has been provided in the development of a community mobilization component for the Safe Motherhood/Newborn Care project.
- TOT of a core set of trainers (2 doctors, 3 midwives, and 1 nurse) in essential obstetrical and newborn care was completed.
- Four clinicians at the district level were trained in obstetric surgical techniques.
- Competency-based training in essential obstetrical and newborn care was completed for 16 commune health stations.
- Supervision and monitoring of obstetric department staff is ongoing.
- The learning and resource center has been established.
- The resource center staff received training in computer and office management skills.
- All 41 commune health stations now have telephones used to seek clinical advice on patient management and to arrange for emergency transport by ambulance.
- Provided guidance and support to efforts of the network to improve its capacity and effectiveness.
- Supported efforts to seek additional funding to extend and expand the activity in Vietnam.
- The baseline and qualitative reports have been completed

Key activities planned for the next reporting period. (December 1 – May 31, 2001)

- Support M&E efforts in Vietnam.

- Complete training at the commune health center level.
- Supervision and monitoring at the commune level.
- Training for district medical staff on use and maintenance of incubator.
- Finalize procurement of equipment for district hospital and commune health centers.
- Repair the delivery room of 3 commune health centers.
- Training for village health workers on basic obstetric first aid in 22 communes.
- Finalize the qualitative report.
- Implement IEC/social mobilization around Safe Motherhood.
- Conduct management and technical support visits.

Ethiopia

To support Result Three, the Partners selected Ethiopia for an exploratory visit for the following purpose:

- To explore Partner interest in working in partnership to further the objectives of NGO Networks for Health and how this might happen;
- To learn from each other about current activities and future plans;
- To orient and educate colleagues about Networks.

Key activities during this reporting period (June 1 – November 30, 2000)

- The Networks exploratory visit took place with a total of twelve representatives from ADRA, CARE, PATH, Plan International, and Save the Children regional and country offices.
- Field visits were conducted.
- NGO Networks made a TA visit to Ethiopia and facilitated development of the concept paper for implementation of activities. The concept paper and budget on behalf of the participating partners was finalized and presented to USAID.

Key activities planned for the next reporting period (December 1 – May 31, 2001)

- Submission for approval from USAID Washington and the Mission.
- Recruit hire and orient Networks Coordinator and other Secretariat staff.
- Recruit hire and orient project level staff.
- Form Managerial Board and Technical Advisory Group and establish TOR and schedules of meetings for each group.
- Finalize TOR for AVSC TA to the project, draw up contractual agreement.
- AVSC assessment of training needs.
- Begin baseline surveys.

III.   CROSS-CUTTING ACTIVITIES

A. Communications, Documentation & Dissemination

To achieve its Results, *Networks* uses a combination of public relations, marketing, advocacy, development education, technical assistance, and monitoring and evaluation activities. Communication, documentation, and dissemination activities are key discrete activities within the project and important cross-cutting elements that contribute to and support all activities including each of the technical areas.

Networks communication team provides direct support to *Networks* staff, supports the information needs of our PVO and NGO partners in the project technical areas both at headquarters, and field offices, and reaches wider country and international development networks through a combination of activities, mediums, and mechanisms.

During this six month reporting period, multiple diverse information activities were carried out in the following key areas: 1. identification, development, production, and dissemination of essential marketing materials, technical project documents, resources, and reports; 2. expansion of website and email capacity and reach; and 3. resource center development and capacity-building to partner focus country offices. In addition, recruitment for the communications specialist position continued.

Key activities during this reporting period (June 1 – November 30, 2000)

- *Networks* marketing materials updated and information packets disseminated at various meetings, conferences, and workshops
- *At a Glance (P*reventing STIs) written, published, and disseminated
- Copy for two issues of *At a Glance* on emergency contraception written and in review and next issue on maximizing access and quality planned
- Posters on PROCOSI and *Networks* written, designed, and produced for Global Health Council Conference poster sessions
- *Networks Resources for Family Planning, Maternal and Child Health, and HIV Programs* (annotated bibliography) finalized, published and disseminated; and resources being identified for next installment
- *Awareness, Mobilization, and Action for Safe Motherhood: A Field Guide* written and finalized (to be published by MNH project), with dissemination by *Networks*
- *Community-Centered Approaches to Behavior Change: Models and Processes for Health and Development* written, produced and disseminated
- Three project strategy and technical approach documents (Family Planning and Reproductive Health, Behavior Change, and Monitoring and Evaluation) translated into Spanish and disseminated
- *Adolescent Sexual and Reproductive Health Memorandum* on Bangkok meeting written and disseminated
- Report planning for Safe Motherhood workshops (Kenya and Chiang Mai) and Plan/Adra Lessons Learned conference (Kenya) completed
- Network documentation reports on PROCOSI, Group Pivot, and Nigeria Women's Networks in review and revision process

- Technical assistance provided to Armenia and Malawi to develop project materials, develop resource centers, support staff recruitment, and assess material and information needs
- Mailing database updated, added to, and maintained on ongoing basis
- *Networks* website and email used to share new and upcoming project activity information, publications, and provide linkages to other groups and resources
- Resource Center continuously developed and new program and technical resources identified, acquired, and shared with Partner country offices

Key activities planned for the next reporting period (December 1, 2000 – May 30, 2001)

- Hire and orient communication specialist
- Provide communications TA to NICASALUD
- Support focus country resource center development in Armenia, Malawi and Nicaragua
- Publish and disseminate the following *Networks* products:
    - *At a Glance* issues on: Emergency Contraception, Maximizing Access and Quality, and Mother-To-Child Transmission, and Use of Process Indicators
    - *NICASALUD Baseline Survey Report*
    - Network documentation of: PROCOSI, Group Pivot, and Nigerian Women's Networks
    - *Networks Resources* (2nd installment)
- Finalize Plan/Adra Lessons Learned Conference report/guide
- Participate in planning of dissemination meetings of PROCOSI and Nigerian Women's Networks profiles
- Participate in planning and organization of periodic *Networks* presentations for G/PHN, PVOs and CAs
- Disseminate *Awareness, Mobilization, and Action for Safe Motherhood: A Field Guide* to Partner country offices
- Revise *Networks* exhibit and support panel presentation at Global Health Conference 2001, and support *Networks* participation in other national and international conferences
- Provide continuous updating and additions to mailing database and email groups
- Provide ongoing project and focus country updates via *Networks* website to enhance information sharing and linkages to information resources
- Host communication, documentation, and dissemination working group meeting, and participate in selected communications IT meetings and conferences

B. Monitoring and Evaluation

The NGO Networks Monitoring and Evaluation effort focuses on improving the capacity of Network members in focus countries, and the Partners to assess the performance of their CS/FP/RH/HIV programs, assess priority intervention areas, and improve interventions. This work directly enhances the capability of the Partners and other member organizations of focus country Networks to achieve the project SO and IRs 1-4.

During the reporting period, the M&E team worked on three fronts. First, it further decentralized M&E activities to some focus countries by relying on local counterparts to formulate agendas for regular project monitoring of community practices and knowledge. Second, it continued capacity-

building of new Network members to identify project indicators, develop M&E instruments and carry out baseline surveys. Third, it worked closely with the Partners and with the MEASURE project to develop indicators for assessing the PVO institutional capacity in providing FP/RH. These activities are summarized below.

Key activities during this reporting period (June 1 – November 30, 2000)

Nicaragua
- Worked with NICASALUD to train and manage 13 NGO members to carry out a baseline Survey.
- Carried out with NICASALUD a Tabulation Workshop for 13 NGOs to hand-tabulate baseline data.
- Continued with NICASALUD to train 13 NGOs to write baseline reports and apply findings to their programs.
- NICASALUD cleaned its computerized database of the PVO baseline results, which were analyzed by NGO Networks.
- Developed generic computer programs for survey analyses at all other project sites.
- Prepared and presented a baseline report to the NICASALUD members and to USAID/Washington.
- Translated the baseline report into Spanish which was reviewed by NICASALUD partner managers.
- Responded to four PVO NICASALUD members to provide technical assistance to begin regular project monitoring.
- Supported NICASALUD to develop monitoring instruments, held a refresher training workshop, and a tabulation workshop for project monitoring.

Malawi
- During June NGO members of Umoyo Network completed their organizational reports about the baseline survey.
- Baseline data entered into computer database (double entry and basic cleaning).
- NGO Networks carried out additional cleaning of the data in preparation for the baseline report preparation.
- NGO Networks assisted Umoyo Network to carry out a training needs assessment of NGO sub-grantees, potential PVO sub-grantees, and Partners.

Armenia
- In association with PATH, held a capacity-building workshop in qualitative methods and managed collection of qualitative data for program planning.
- Visited sites to plan a baseline survey for 3 PVO partner organizations.
- Carried out training for the baseline data collection, and managed data collection and hand tabulations of baseline results.

Institutional Capacity-building
- Developed with the Partners institutional capacity-building indicators.
- Developed a Scope of Work for MEASURE to provide technical assistance to the partners to carry out institutional assessments.

Materials Development and Information Dissemination
- Continued to refine a training manual for carrying out LQAS baseline surveys and monitoring.
- Field-tested the latest draft in Armenia for baseline data collection.
- Carried out training of the CORE members in LQAS survey methods and introduced the prototype training manual for comment.

Operations Research
- Worked with QA Project to develop a scope of work for carrying OR on dual protection counseling in Malawi.
- Oriented the Director of Umoyo Network on OR activities discussed in prior administration.

Key activities planned for the next reporting period (December 1, 2000 – May 30, 2001)

- Facilitate NICASALUD to carry out regular monitoring of project indicators by its members.
- Support NGO Networks Armenia to develop a community-based and facility-based monitoring system.
- Produce baseline reports for Umoyo Network and NGO Networks Armenia.
- Facilitate Umoyo Network to carry out baseline surveys of new members and regular monitoring by current members.
- Produce reports on project monitoring carried out by NICASALUD.
- Support Umoyo Network and NICASALUD to disseminate results at the Global Health Conference Annual Meeting.
- Engage MEASURE to commence work with the Partners to measure institutional capacity-building indicators.
- Engage QAP to work with Umoyo Network to carry out operations research .
- Provide M&E support to FP+ projects and to activities planned in Ethiopia.

IV. PARTNERS

A. PATH

Key activities during this reporting period (June 1 – November 30, 2000)

- Coordination with Partner Agencies
    - Updated ADRA/PATH concept paper and conducted PATH/ADRA collaborative mission to Malawi (May 1-8, 2000).
    - Completed training needs assessment format for PATH-wide development of capacity building plan for FP/RH/CS/HIV/AIDS.
    - Preliminary meetings among PATH-Indonesia and Partner NGOs (PLAN and ADRA) in Indonesia.
    - Ongoing coordination with ADRA for dissemination of materials and discussion with other Partners to share project information.
    - Coordination with PATH Bangkok office in support of ASRH initiative. Made arrangements to hire Kate Bond half time and relocate her to Bangkok in support for ASRH initiative.
    - Shared copies of WRHI School of Public Health Reproductive Health Curricula with ADRA.
    - Hosted meetings for Emergency Contraception technical update, joint NPC/PAG discussions, MAQ Technical Update, and ASRH planning with partner staff.
- Administrative/Management
    - Participated in PAG face-to-face meetings and teleconferences.
    - Participated in NPC, including site visits.
    - Drafted and obtained two extensions for Year III budget and incorporated it into life-of-project pipeline.
    - Updated PowerPoint presentation of PATH overview for *Networks* audience.
    - Identified potential In-Kind matches.
    - Worked with Recruitment Specialist to identify Deputy Director candidates, interviewed candidates and referred candidates to *Networks*. Hired Deputy Director.
    - Participated in review and comment on Year 3 Work Plan.
    - Participated on interview panels for candidates for the RTA positions in Africa and Asia.
    - Continued search for communications specialist candidate.
    - Briefed Networks core staff on NPC recommendations on two occasions.
    - Revised Year III workplan.
    - Revised PATH's Partner Agreement with Networks.
    - Developed quarterly travel plan for non-seconded PATH staff.
    - Contributed to Fall Results Review documents.
    - Contributed to Year III Management Review documents.
    - Provided appropriate liaison with *Networks* for personnel issues.

B. CARE

Key activities during this reporting period (June 1 – November 30, 2000)

- Country/Technical/Other Activities
  - CARE's Technical Advisor assigned to NGO Networks made a TA visit to Ethiopia and facilitated development of the concept paper for implementation of activities there. She finalized the concept paper and budget on behalf of the participating partners.
  - CARE's Technical Advisor for Networks also made a TA visit to Armenia, provided planning assistance to CARE's regional pilot there, and gave a series of recommendations to CARE and the other partners on management of Networks activities in Armenia.
  - CARE's Technical Advisor was part of a team that facilitated initial planning discussions for the Networks partners in India; through CARE India, organized the field travel to a CARE project site as part of these meetings.
  - Provided technical guidance to CARE Tajikistan during preparation of their submission for Networks funding.
  - CARE seconded staff have actively participated in development of the Networks Annual Review and provide regular input into progress reports.
  - Developed full briefings on focus countries (Nicaragua, Vietnam) for presentation to incoming *Networks* Director.
  - Gave technical direction to consultants' in-country training activities and in developing or revising training materials. For example, assisted with development of the *NicaSalud* Network, which included creation of a collaborative capacity building strategy. In M&E, supervised consultant revising a training manual for LQAS surveys and provided technical support to training consultant.
- NGO Networks HIV/AIDS Working Group
  - Participated on the NGO Networks for Health HIV/AIDS working group
  - Disseminated and collected the NGO Networks for Health inventory of CARE's HIV/AIDS activities
  - Produced a report on the information collected through the HIV/AIDS inventory and disseminated it to the HIV/AIDS working group, the Health and Population unit, the PAD Director and CARE's regional management units.
  - Participated in the planning of the upcoming workshop: DELIVERING INTEGRATED FP/HIV/STI SERVICES: *"Achieving More Together"* in Lusaka, Zambia sponsored by NGO Networks for Health and hosted by CARE-Zambia.
- Administrative/Management
  - Contributed to development, review and revision of the Project Workplan for Year III.
  - Participated in Program Advisory Group meetings/teleconferences.
  - Participated in NPC, including major meetings and review of project performance management guidelines and recruitment of new Project Director.
  - CARE headquarters provides administrative and managerial backstopping to the Country Offices in Nicaragua and Vietnam, in support of their roles as Lead PVO in these two countries.

C. ADRA

Key activities during this reporting period (June 1 – November 30, 2000)
- Organized and held the ADRA-caapcity development planning workshop in which NGO Networks staff were invited
- Continued to recruit for the regional technical advisor position for Africa, the Reproductive health Technical Advisor and Senior Grants Administrator for ADRA HQ.
- Hired Technical Advisor and Senior Grants Administrator
- ADRA-PLAN "Lessons Learned in RH" workshop held in Nairobi from August 14 – 18, 2000.
- Joined NGO Networks for Health teams on exploratory visits to Ethiopia and India.
- Participated in partner cross visits to CARE projects in Cambodia.
- Participated in the Adolescent Sexual and Reproductive Health initiative in Asia.
- Participated in a Safe Motherhood workshop in Thailand.
- Participated in the end-of-project evaluation of the DANIDA-funded FP/HIV/AIDS project in Malawi. Also assisted in proposal writing for a FP/HIV/AIDS project for the Malawi Army for submission to the Australian Aid for International Development (AUSAID). This project has been funded.
- Assisted in the proposal writing for a follow-on of the DANIDA FP/HIV/AIDS project which has been funded.
- Assisted in the ADRA/SAVE joint proposal submitted to the USAID mission/Malawi.
- Participated in the PATH/ADRA joint visit to Malawi to explore the possibilities for collaborative development of a Home-Based-Care manual.
- Continued to provide support to SAVE USA, the PVO in Malawi.
- As lead PVO in Armenia, ADRA continued to coordinate partner activities especially sourcing Technical Assistance from Networks and CAs.
- ADRA expanded its Community Based IMCI program in the hurricane Mitch affected areas.

Key activities planned for the next reporting period (December 1, 2000 – May 30, 2001)

- ADRA will submit up to six proposals for FP+ Initiative.
- A worldwide workshop entitled "Integrating FP/RH into ADRA's Programs; Opportunities and Challenges," will take place in March. Programs Managers and Child Survival Country Directors have been invited to this workshop. It is hoped that from this workshop will emerge a sense of commitment to the integration of FP/RH into ADRA's programs in specific countries.

D. Save the Children

Key activities during this reporting period (June 1 – November 30, 2000)

- Africa HIV PLG / Uganda FP/RH: A cross sectoral team led the planning and implementation of a week long meeting in Kampala this October, for the purpose of exchanging program lessons learned and developing program strategy for Save field offices working on HIV/AIDS in Africa. Local Uganda NGOs as well as Save field offices shared their work. Daily themes included prevention, care and support, mitigation, and strategic planning, and a day was used for field visits to see activities of local NGOs. During this field visit by the RHA, substantial interest was

raised in generating new program activities specifically focusing on FP/RH. A subsequent trip was planned for the purpose of FP/RH design.

- ARSH Capacity Building and Exchange Workshop: Youth Specialist, Amy Weissman, led a workshop for 6 of SC's ARSH country programs. This meeting focused on qualitative data collection methods, and using data for program planning.
- Training on participatory learning and action for ARSH programs conducted in Bolivia, and the Philippines.
- Capacity Measurement: A meeting was held between SC staff and the Measure project for the purpose of exploring means to track gains in capacity. Included was a discussion of collection of indicators required for the Networks project. Subsequently, a matrix was sent to field offices requesting data required for reporting on those indicators.
- Results planning for ARSH programming facilitated in Ethiopia, Malawi, Vietnam, and Bhutan.
- Baseline survey developed and refined in Ethiopia.
- Strategic planning for youth development programming was conducted in Egypt.
- RHA Ronnie Lovich worked with Malawi field office to review on-going COPE program activities, and develop plans for strenthening capacity for key components including home based care, strengthening HIV prevention as part of care, and community mobilization. A proposal for a COPE Transition year was finalized based on these plans, and subsequently awarded by USAID Malawi. During this visit, RHA met with Umoyo Networks staff, reviewed a Home Based Care study that was conducted by Umoyo, Save the Children, NACP and USAID, and provided feedback to team.
- Armenia Networks Pilot: Thre RH team supported the Armenia field office from a distance, providing gap bridging assistance during the transition of field office leadership, with recruitment of RH Technical Advisor, ans assisting with revision of scope of work following an in-country assessment by Abt.
- Reproductive Health Advances: A training design meeting was held with senior program managers from various field offices. The purpose of the meeting was to identify core competencies required for implementation of reproductive health programs. It is to be the basis of training that could be done globally or regionally for program amanagers. RH Advances is not intended to replace in-country training for program implementaters. It should be noted that planning of the RH Advances course was deferred until later opportunity, given the time requirements for the new emphasis on the FP+ Initiative. Save is still interested in developing and implementing this course, once new initiatives are proposed.
- Essential Library: RH and CS staff of the office of health participated in the compilation of an essential library to be shipped to all field offices. Technical materials reviewed during this period covered a broad range of FP/RH and maternal and newborn care topics. The first shipment will go out in Janaury. A supplemental shipment will be planned for later in the year.
- Health Program Learning Group: Reproductive Health topics emphasized during this year's annual Program Learning Group (PLG) included safe motherhood updates by ACNM, newborn health update, adolescent reproductive health and approaches to life skills development, and HIV/AIDS program strategies.
- Africa HIV PLG / Uganda FP/RH: A cross sectoral team led the planning and implementation of a week long meeting in Kampala this October, for the purpose of exchanging program lessons learned and developing program strategy for Save field office working on HIV/AIDS in Africa. Local Ugandan NGOs as well as Save field offices shared their work. Daily themes included prevention, care and support, mitigation, and strategic planning, and a day was used for field

visits to see activities of local NGOs. During this field visit by the RHA, substantial interest was raised in generating new program activities specifically focusing on FP/RH. A subsequent trip was planned for the purpose of FP/RH design.

- Pakistan Planning Grant: RHA Ronnie Lovich provided technical support to the Haripur team in Pakistan, for the review of baseline data collected under a planning grant from the Packard Foundation. This foundation work was a situational analysis that documented people's reproductive health-care seeking behavior, with particular focus on the private and traditional health sectors. The analysis reviewed the feasibility of introducing interventions aimed at the private and traditional sector. In a later visit, the RHA returned to review findings, and develop program strategy and proposal; the Packard Foundation subsequently awarded $920,000 for a 3 year interval that will complement an on-going effort to strengthen public sector RH services.
- The RH team continues to participate in USAID MAQ meetings, and has been active in the initiation of a new working group focusing on the community role in quality improvement (CDQ subcommittee). Save the Children now co-chairs this committee with the PRIME II project and JHUCCP.
- General field support for program development for CDQ and PDQ were given in Haiti, Nepal, and West Bank/Gaza.
- Field support for Community Defined Quality in Haiti
  - A Save consultant Maryse Uriodain will travel to Haiti to work with field staff on strengthening and expanding our efforts to mobilize health worker/community partnership to ensure quality of FP/RH services. During this visit she will assist the team with:
    - Review of work to date, program approach and structures
    - Plans for adaptation of the PDQ methodology based on Nepal and Peru expereinces
    - Meetings to review quality concepts from community and health worker perspectives
    - Formation of a health worker/community committee to monitor quality improvement and participate in Q1 process.

Key activities planned for the next reporting period (December 1, 2000 – May 30, 2001)

- Save the Children is co-chairing a task force initiated within the USAID MAQ steering committee, together with JHU and PRIME/INTRAH. The first meeting will be held on December 19, 2000. The meeting will cover conceptualization of Community Defined Quality, review of relevant field examples, and mobilization of a 'core' working group and action plan.
- Field support for PDQ in Nepal
  - Marcie Rubardt will be traveling to Nepal to work with PDQ team to provide support for Siraha based Partnership Driven Quality efforts, review baseline and subsequaent data for evaluating the effort, further explore linkages with other quality improvement efforts in Nepal, and contribute to program documentation
- CDP/PDQ Global Initiative meeting will be held in December 4, 2000 at Save the Children with SC staff, consultants, and field intern to review progress to date on Save application of partnership approaches to the quality improvement process. Field experience in Haiti, Nepal and Peru will be reviewed, lessons learned identified and complied for later use in development of materials and mothods, identify field support needs, develop action plan for forwarding progress as a global initiative.
- PDQ manual will be developed, edited by consultant Debbie Fagan, and will be completed together with Ronnie Lovich.

V. PROJECT MANAGEMENT

A. Staffing

During this reporting period, a significant change has occurred in Networks core staffing beginning with the arrival of Marge Koblinsky and Colleen Conroy as Project Director and Deputy Director respectively in October 2000. Networks technical operations will be led by both Marge and Colleen, as the Director leads the FP+ Initiative and manages capacity-building work, while the Deputy Director coordinates focus country activities and manages network development. Staffing needs and structure continue to be reviewed both at Partner, field, and Networks HQ levels with core team job descriptions being reviewed and revised to reflect the Project's goals.

VI.   SUMMARY FINANCIAL REPORT – NOVEMBER 30, 2000

PVO/NGO Networks for Health
C.A. No: HRN-A-00-98-00011-00
March 5, 1998 - March 4, 2003

NGO NETWORKS FOR HEALTH

Summary Financial Report November 30, 2000

	Total Budgeted Mar 98 - Mar 03	Expenditures Mar 5, 1998 to Nov. 30, 2000	Budget DEC 00	Budget JAN 01	Budget FEB 01	Budget MAR 01	Budget APR 01	Budget MAY 01	Budget JUN 01	Budget JULY 01	Budget AUG 01	Budget SEPT 01	Budget OCT 01	Budget NOV 01	Budgeted Expenditures Dec 00-Nov 01	Balance of Budget Dec 01 - Mar 03
I Personnel	2,425,336	1,865,383	85,077	85,077	85,077	85,077	85,077	85,077	85,077	85,077	85,077	85,077	85,077	85,077	1,020,924	-460,971
II Fringe	587,860	462,073	18,717	18,717	18,717	18,717	18,717	18,717	18,717	18,717	18,717	18,717	18,717	18,717	224,603	-98,816
III Travel	1,540,309	550,438	22,000	22,000	22,000	22,000	22,000	22,000	22,000	22,000	22,000	22,000	22,000	22,000	264,000	725,871
IV Equipment	75,000	119,470	0	35,000	0	0	35,000	0	0	0	0	0	0	0	70,000	-114,470
V Supplies	159,928	311,691	2,630	0	0	0	0	0	0	0	0	0	0	0	2,630	-154,393
VI Contracts	1,568,318	1,013,259	25,833	25,833	25,833	25,833	25,833	25,833	25,833	25,833	25,833	25,833	25,833	25,833	310,000	245,059
VII Subgrants:																
A. ADRA	6,546,337	1,354,621	137,878	137,878	137,878	137,878	137,878	137,878	151,666	151,666	151,666	151,666	151,666	151,666	1,737,264	3,454,452
B. CARE	4,986,246	2,395,498	231,000	231,000	231,000	231,000	231,000	231,000	231,000	231,000	231,000	231,000	231,000	231,000	2,772,000	-181,252
C. PATH	2,028,706	1,177,714	65,280	65,280	65,280	65,280	65,280	65,280	71,808	71,808	71,808	71,808	71,808	71,808	822,528	28,464
D. PLAN	8,092,929	1,590,033	98,809	98,809	98,809	98,809	98,809	98,809	103,749	103,749	103,749	103,749	103,749	103,749	1,215,348	5,287,548
E. Other	5,325,694	823,423	101,628	101,628	101,628	101,628	304,883	304,883	304,883	304,883	304,883	304,883	304,883	304,883	2,845,575	1,656,697
Subtotal Subgrants	26,979,912	7,341,289	634,594	634,594	634,594	634,594	837,850	837,850	863,106	863,106	863,106	863,106	863,106	863,106	9,392,714	10,245,909
VIII Other Direct	6,447,640	900,923	78,095	53,340	58,674	64,541	70,996	78,095	85,905	58,674	64,541	70,996	78,095	85,905	847,856	4,698,861
Total Direct Costs	39,784,303	12,564,526	866,947	874,562	844,896	850,763	1,095,472	########	########	########	########	########	########	########	12,132,728	15,087,049
Indirect Costs	2,125,256	1,207,767	40,667	34,624	35,842	37,182	38,656	40,278	42,061	35,842	37,182	38,656	40,278	42,061	463,330	454,159
Total USAID	41,909,559	13,772,293	907,614	909,185	880,738	887,945	1,134,129	########	########	########	########	########	########	########	12,596,057	15,541,209
Total Cost Share	10,477,390	10,273,267	226,904	227,296	220,184	221,986	283,532	276,962	285,675	277,312	279,114	281,096	283,277	285,675	3,149,014	-2,944,891
Total Program Costs	52,386,949	24,045,560	1,134,518	1,136,482	########	1,109,931	1,417,661	########	########	########	########	########	########	########	15,745,072	12,596,317